

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL092096</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>12/08/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>SUNRISE OF RALEIGH</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>4801 EDWARDS MILL ROAD RALEIGH, NC 27612</b>		
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C 000	Initial Comments  Report of a Biennial Survey by Billy S. Bryant and Greg Cates conducted on 12/08/2015.  Records indicate this facility was first licensed on 02/27/1996. The facility is currently licensed for 100 Beds with a 46 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	C 000		
C 111	Must Have Current San. & Fire Safety Reports  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION( f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.  This Rule is not met as evidenced by: 1. The facility failed to have available for review and maintained on site current (within the calendar year) kitchen and building sanitation inspection reports. This requirement is to ensure that the facility is inspected on a regular basis by the regulatory authority to ensure compliance with sanitation and environmental requirements.  Findings on 12/08/2015.  a. A current (within the calendar year) building sanitation report was not available for review at	C 111		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 111	Continued From page 1  the time of the survey.  b. A current (within the calendar year) kitchen sanitation report was not available for review at the time of the survey.	C 111		
C 164	Housekeeping and Furnishings-Clean, Repaired  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. The facility has failed to keep walls, ceilings and floors clean and in good repair as evidenced but not limited to the specific examples listed in the findings. Failure to keep the walls ceilings and floors clean and in good repair could effect the occupants of the facility by lessening the quality of their living or working environment.  Findings on 12/08/2015: a. 1st Floor, Sunroom Bistro - The floor requires cleaning in front of the freezer.  b. 3rd Floor, Dining Room - The carpet at the entrance to the room is badly frayed and constitutes a tripping hazard.  c. 1st Floor, Serving Kitchen - The ceiling drywall is damaged and the paint is peeling.	C 164		

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C 164	Continued From page 2  d. 1st Floor, Serving kitchen - The drywall adjacent to the sink is damaged and the paint is peeling.  e. 3rd Floor, Washing Machine Closet - Where repairs were made there is a large hole in the wall behind the washing machine.  f. Bathique - The ceiling is damaged.  g. There is a pattern of walls, doors and door frames in the rooms and corridors that have marred paint, scuffs and light damage.  2. The facility has failed to keep furnishings in good repair.  Finding on 12/08/2015: a. Terrace Floor, Staff Break Room - The bottom cabinet door is detached from the cabinet and hanging by one hinge.	C 164		
C 166	Housekeeping-Maintained Free of Hazards  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Based on observation the storage of oxygen bottles was not maintained in a manner that kept the facility free from hazards. Oxygen bottles that are not stored in an oxygen bottle rack or	C 166		

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C 166	Continued From page 3  otherwise restrained from falling or being knocked over may present a danger to the occupants of the facility.  Finding on 12/08/2015: a. Oxygen cylinders were found sitting upright and without any means of restraint or storage to prevent them from falling or being knocked over in rooms 201, 212, and 215.  2. Based on observation the facility is not maintained free from hazards. The building code required clearance for electrical equipment must not be encroached upon. Obstructing access to electrical equipment could prevent quick operation if needed for an emergency situation.  Finding on 12/08/2015: a. Electrical Rooms/Closets - There is a pattern of access to the electrical panels being obstructed by items stored in front of the panels.  3. Based on observation the exterior of the building is not maintained in a clean and safe manner due to exterior repairs being needed.  Findings on 12/08/2015: a. Terrace Exterior - The soffit of the patio ceiling is damaged.  b. The Porte Coche (canopy at entrance) has been damaged.	C 166		
C 189	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical,	C 189		

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C 189	<p>Continued From page 4</p> <p>mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by: 1. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. Failure to maintain fire alarm system devices and equipment in a safe and operable condition could effect occupants of the facility if the equipment did not function when and as required.</p> <p>Finding on 12/08/2015: a. Creedmor Corridor - The fire alarm audio visual device did not operate when the fire alarm was tested.</p> <p>b. Kitchen - The duct smoke detector sampling tube in the HVAC unit is clogged with dust.</p> <p>2. Based on observation the facility's fire safety components are not being maintained in a safe operable manner. Doors were permitted to be blocked open or held open by unapproved devices or methods. All the occupants in the facility could be effected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin.</p> <p>Finding on 12/08/2015: a. 1st Floor, Dining Room - The magnetic hold open device has detached from the wall and the door is wedged open.</p>	C 189		

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C 189	<p>Continued From page 5</p> <p>b. 1st Floor, Sunroom - The doors have kickdown hold open devices installed.</p> <p>c. 1st Floor, Sunroom - The Sales Office doors have kickdown hold open devices installed.</p> <p>d. A pattern of resident room doors that open onto the corridor being held open by various means, trash cans, heavy objects etc.</p> <p>3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition as evidenced by doors that do not completely close and latch. Doors are required to completely close and latch in the event of a fire in order to resist the passage of smoke or the spread of fire. All the occupants in the facility could be effected if doors do not latch and remain closed so as to limit the spread of smoke or fire to the area of origin.</p> <p>Findings on 12/08/2015</p> <p>a. 1st Floor, Dining Room - The door coordinator is broken and prevents the doors from closing and latching.</p> <p>b. 3rd Floor, Dining Room - The door coordinator is broken and prevents the doors from closing and latching.</p> <p>c. 3rd Floor, Cross Corridor Doors - The latch is broken on the cross corridor doors adjacent to room 301.</p> <p>d. Kitchen - The door from the kitchen to the corridor did not completely close and latch.</p> <p>4. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition as evidenced by fire safety</p>	C 189		

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C 189	<p>Continued From page 6</p> <p>equipment that would be prevented from functioning as needed in the event of a fire. Fire safety equipment that is prevented from operating as required could affect all the occupants in the facility by allowing smoke and fire to spread from the area of origin.</p> <p>Finding on 12/08/2015:</p> <p>a. Physical Therapy Area - The atrium fire resistant rated shutter is blocked from closing by the portable privacy screen. Note: Corrected while surveyor was on site.</p> <p>b. 2nd Floor, Linen Closet - The 18 " clearance from the fire sprinkler head in the closet adjacent to the stair well is not maintained and flow from the fire sprinkler would be blocked by items stored in the closet.</p> <p>5. Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner as evidenced by gaps and open penetrations in the fire resistant rated ceilings. Fire resistant rated ceilings must be free of gaps and openings in order to resist the spread of fire and smoke in the event of a fire. Penetrations or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin.</p> <p>Finding on 12/08/2015:</p> <p>a. 1st Floor, Sunroom Bistro - There are gaps in the fire resistant rated ceiling at the flush mounted down lights.</p> <p>b. Terrace Floor, Staff Break Room - There is a hole in the fire resistant rated stairwell wall on the breakroom side.</p>	C 189		

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C 189	<p>Continued From page 7</p> <p>6. Based on observation there is failure to maintain electrical emergency/safety related equipment in a safe operating condition. Failure to maintain electrical emergency safety equipment in safe and operable condition could effect occupants of the facility if the equipment did not function when and as required.</p> <p>Findings on 12/08/2015:</p> <p>a. Terrace Floor - Wall mounted emergency light #42 did not operate when tested.</p> <p>b. Terrace Floor - The lighted directional exit sign at the cross corridor doors adjacent to the elevator equipment/Electrical Room did not operate when tested.</p> <p>c. Terrace Floor - The exterior wall mounted emergency lights above the dining room doors to the terrace did not operate when tested.</p> <p>7. Based on observation there is a failure to maintain the facility emergency exit pathways unobstructed. Emergency means of egress/pathways must be kept clear of obstructions and encroachments and not used for storage. In the event of an emergency requiring evacuation from the facility, obstructing or encroaching on the means of egress/pathways could effect occupants of the facility by delaying evacuation.</p> <p>Finding on 12/08/2015:</p> <p>a. Facility Exit Stairs - There is pattern of items stored in the stairway landings obstructing the exit path.</p>	C 189		